

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IF. NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	2/22
FORMALITY REVIEW	H.S.	866	63-26-01
RESPONSE FORMALITY REVIEW	fu	1019	11-20-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	10 15 24 03
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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11	✓
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39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	✓
52	✓
53	0
54	✓
55	✓
56	0
57	✓
58	✓
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Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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523  
11-20-01  
L.L.  
03/27/01